



WITHHOLDING TAX QUESTIONNAIRE

INSTRUCTIONS: PLEASE COMPLETE THE QUESTIONNAIRE IN ITS ENTIRITY. PLEASE CLEARLY PRINT OR TYPE ALL INFORMATION. EMAIL NOTIFICATIONS WILL BE SENT TO THE EMAIL ADDRESS STATED ON THE FORM (IF REQUESTED). QUESTIONS CAN BE DIRECTED TO THE TAX OFFICE AT THE CONTACT INFORMATION BELOW.

LEGAL NAME OF BUSINESS _____

BUSINESS MAILING ADDRESS _____

CITY/STATE/ZIP _____

FEDERAL ID NUMBER (FEIN) _____

CONTACT PERSON _____

TELEPHONE NUMBER _____ EXTENSION _____

CONTACT EMAIL ADDRESS _____

EFFECTIVE DATE OF WH _____

FREQUENCY MONTHLY _____ (REQUIRED IF TAX DUE IS GREATER THAN \$2,400 ANNUALLY)
(DUE ON OR BEFORE THE 15TH DAY OF THE FOLLOWING MONTH)

 QUARTERLY _____ (ALLOWABLE IF AMOUNT IS LESS THAN \$2,400 ANNUALLY)
(DUE END OF THE MONTH FOLLOWING CLOSE OF QUARTER)

WOULD YOU LIKE WH COUPONS MAILED TO YOU? YES _____ NO _____

IS THIS A COURTESY WITHHOLDING ACCOUNT? YES _____ NO _____

WOULD YOU LIKE US TO EMAIL YOUR ACCOUNT NUMBER? YES _____ NO _____